## **CONSENT FORM**

- 1. I consent to make a claim under the Fair Labor Standards Act, 29 U.S.C. § 201, *et seq.*, and any applicable state law, against my current/former employers, Residential Fences Corp. and Laser Industries Inc., to secure any relief that may be awarded, including overtime pay, liquidated damages, attorneys' fees, costs and other relief arising out of my employment.
- 2. During the past three years, there were occasions when I worked more than 40 hours in a week for Residential Fences Corp. and Laser Industries Inc. and I did not receive proper overtime compensation for those hours.
- 3. I authorize Shulman Kessler LLP to represent me in this case.

Date: \_\_\_\_\_\_ 5:38:36 PM PDT

Signature

Michael Froehlich

Print Name